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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines The American Occupational Therapy Association, Inc. Political Action Committee 4720 Montgomery Lane ADDRESS (number and street) PO Box 31220 Check if different than previously Bethesda MD 20824 1220 reported. (ACC) FEC IDENTIFICATION NUMBER **STATE** CITY A ZIPCODE A IS THIS **AMENDED** NEW C00089086 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Χ Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Post -Election General (30G) Runoff (30R) Special (30S) Report for the: Termination Report (TER) in the Election on State of 09 0 1 2006 09 3 0 2006 Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Christina A. Metzler Type or Print Name of Treasurer Electronically Filed by Christina A. Metzler 10 18 2006 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 02/2003) Only

Image# 26960543723

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name The American Occupational Therapy Association, Inc. Political Action Committee (AOTPAC) [®] D " D 0.9 0 1 2006 0.9 3 0 2006 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand [°]2006 54213.25 January 1 (b) Cash on Hand at 109629.03 Begining of Reporting Period 24957.85 156669.20 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 134586.88 210882.45 6(a) and 6(c) for Column B) 52143.97 128439.54 Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 82442.91 82442.91 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) This Committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003) Page 3

Write or Type Committee Name

The American Occupational Therapy Association, Inc. Political Action Committee (AOTPAC)

Report Covering the Period:

From:

м м 0 9 01

^Y 2 0 0 6

To:

0 9

^D 3 0

2006

| | I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|-----|----------------------------------------------------------------------|-------------------------------|-----------------------------------|
| 11. | Contributions (other than loans) From: (a) Individuals/Persons Other | | |
| | Than Political Committees (i) Itemized (use Schedule A) | 600.00 | 12630.00 |
| | (ii) Unitemized | 24349.00 | 143982.87 |
| | (iii) TOTAL (add Lines 11(a)(i) and (ii) | 24949.00 | 156612.87 |
| | (b) Political Party Committees | 0.00 | 0.00 |
| | (c) Other Political Committees (such as PACs) | 0.00 | 0.00 |
| | 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) | 24949.00 | 156612.87 |
| 2. | Transfers From Affiliated/Other Party Committees | 0.00 | 0.00 |
| 3. | All Loans Received | 0.00 | 0.00 |
| | Loan Repayments Received Offsets To Operating Expenditures | 0.00 | 0.00 |
| | (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) | 0.00 | 0.00 |
| Ο. | to Federal candidates and Other Political Committees | 0.00 | 0.00 |
| 7. | Other Federal Receipts (Dividends, Interest, etc.) | 8.85 | 56.33 |
| 8. | | | |
| | (a) Non-Federal Account (from Schedule H3) | 0.00 | 0.00 |
| | (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| | (c) Total Transfer (add 18(a) and 18(b)). | 0.00 | 0.00 |
| 19. | Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) | 24957.85 | 156669.20 |
| 20. | Total Federal Receipts (subtract Line 18(c) from Line 19) | 24957.85 | 156669.20 |

DETAILED SUMMARY PAGE

of Disbursements

Page 4

FEC Form 3X (Rev. 02/2003)

| | II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|----|----------------------------------------------------------------------------------|-------------------------------|-----------------------------------|
| 1. | Operating Expenditures: (a) Shared Federal/Non-Federal | | |
| | Activity (from Schedule H4) | 0.00 | 0.00 |
| | (i) Federal Share | 0.00 | 0.00 |
| | (ii) Non-Federal Share | 0.00 | 0.00 |
| | (b) Other Federal Operating Expenditures | 643.97 | 2864.54 |
| | (c) Total Operating Expenditures | | |
| | (add 21(a)(i), (a)(ii) and (b)) | 643.97 | 2864.54 |
| 2. | Transfers to Affiliated/Other Party Committees | 0.00 | 0.00 |
| 3. | Contributions to | | |
| | Federal Candidates/Committees and Other Political Committees | 51500.00 | 125200.00 |
| ŀ. | Independent Expenditure | 0.00 | 0.00 |
| 5. | (use Schedule E) | 0.00 | 0.00 |
| | Committees (2 U.S.C. 441a(d)) (use Schedule F) | 0.00 | 0.00 |
| ò. | Loan Repayments Made | 0.00 | 0.00 |
| | Loans Made | 0.00 | 0.00 |
| 3. | Refunds of Contributions To: (a) Individuals/Persons Other | 0.00 | 375.00 |
| | Than Political Committees | | |
| | (b) Political Party Committees | 0.00 | 0.00 |
| | (c) Other Political Committees (such as PACs) | 0.00 | 0.00 |
| | (d) Total Contribution Refunds | | |
| | (add Lines 28(a), (b), and (c)) | 0.00 | 375.00 |
| 9. | Other Disbursements | 0.00 | 0.00 |
| ٥. | Federal Election Activity (2 U.S.C 431(20)) | | |
| | (a) Shared Federal Election Activity | | |
| | (from Schedule H6) | 0.00 | 0.00 |
| | (i) Federal Share | 0.00 | 0.00 |
| | (ii) "Levin" Share | 0.00 | 0.00 |
| | (b) Federal Election Activity Paid Entirely With Federal Funds | 0.00 | 0.00 |
| | (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) | 0.00 | 0.00 |
| 1. | Total Disbursements (add Lines 21(c), 22, | | |
| | 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) | 52143.97 | 128439.54 |
| 2. | Total Federal Disbursements | | |
| | (subtract Line 21(a)(ii) from Line 30(a)(ii) | F0140 07 | 100400 5 |
| | from Line 31) | 52143.97 | 128439.54 |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| | III. Net Contributions/Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|-----|-------------------------------------------------------------------------|----------------------------|-----------------------------------|
| 33. | Total Contributions (other than loans) from Line 11(d), page 3) | 24949.00 | 156612.87 |
| 34. | Total Contribution Refunds (from Line 28(d)) | 0.00 | 375.00 |
| 35. | Net Contributions (other than loans) (subtract Line 34 from Line 33) | 24949.00 | 156237.87 |
| 36. | Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 643.97 | 2864.54 |
| 37. | Offsets to Operating Expenditures (from Line 15, page 3) | 0.00 | 0.00 |
| 38. | Net Operating Expenditures (subtract Line 37 from Line 36) | 643.97 | 2864.54 |

| ~ | OUEDIUE A (EEO E OV) |] | | FOR LINE NUMBER: PAGE 6 / 23 | | | | | |
|--------------------------|---------------------------------------------------------------------------------------------------|----------------------------|-------------------------------------------------------------------------|-------------------------------------------------------------------------------------------|--|--|--|--|--|
| SCHEDULE A (FEC Form 3X) | | | Use separate schedule(s) | (check only one) | | | | | |
| ITEMIZED RECEIPTS | | | or each category of the | | | | | | |
| •• | | | Detailed Summary Page | X 11a 11b 11c 12 | | | | | |
| | | | | 13 14 15 16 17 | | | | | |
| Ar or | y information copied from such Reports and Sta for commercial purposes, other than using the n | tements may ame and ado | not be sold or used by any perso dress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. | | | | | |
| \setminus | NAME OF COMMITTEE (In Full) | | | | | | | | |
| \rangle | The American Occupational Therapy As (AOTPAC) | sociation, | Inc. Political Action Commit | tee | | | | | |
| Α. | Full Name (Last, First, Middle Initial) Norma Ellen Rossi | | | Date of Receipt | | | | | |
| | Mailing Address 113 Prospect Park SW | | | 09 / 05 / Y Y Y Y Y | | | | | |
| | City | State | Zip Code | Transaction ID: 16755343 | | | | | |
| | Brooklyn | NY | 11218-1283 | Amount of Each Receipt this Period | | | | | |
| | FEC ID number of contributing federal political committee. | C | | 100.00 | | | | | |
| | Name of Employer Metro SPO | Occupation OT | 1 | | | | | | |
| | Receipt For: Primary General Other (specify) | Aggregate | Year-to-Date ▼ 225.00 | | | | | | |
| R | Full Name (Last, First, Middle Initial) Rebecca E Argabrite Grove | | | Date of Receipt | | | | | |
| υ. | | | | ─ │ | | | | | |
| | Mailing Address 41718 Browns Farm Lar | | 7'a Cada | 09 05 2006 | | | | | |
| | City | State | Zip Code | Transaction ID: 16755355 | | | | | |
| | Leesburg | VA | 20176-6026 | Amount of Each Receipt this Period | | | | | |
| | FEC ID number of contributing federal political committee. | C | | 30.00 | | | | | |
| | Name of Employer Loudoun County Public Schools | Occupation OT | 1 | | | | | | |
| | Receipt For: | Aggregate | Year-to-Date ▼ | | | | | | |
| | Primary General Other (specify) ▼ | | 332.00 | | | | | | |
| <u> </u> | Full Name (Last, First, Middle Initial) Denise Anne Rotert | | | Date of Receipt | | | | | |
| | Mailing Address 2609 S Prairie Ave | | | M M / D D / Y Y Y Y Y O O O O O O O O O O O O O O | | | | | |
| | City | State | Zip Code | Transaction ID: 16790348 | | | | | |
| | Sioux Falls | SD | 57105-4626 | Amount of Each Receipt this Period | | | | | |
| | FEC ID number of contributing federal political committee. | C | 0.100 1020 | 250.00 | | | | | |
| | Name of Employer AOTA | Occupation OT | ١ | 7 | | | | | |
| | Receipt For: ☐ Primary ☐ General Other (specify) ▼ | Aggregate | Year-to-Date ▼ 250.00 | | | | | | |
| s | UBTOTAL of Receipts This Page (optional) | | | 380.00 | | | | | |
| \vdash | , | | | - | | | | | |

TOTAL This Period (last page this line number only)

| SCHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 7 / 23 |
|-----------------------------------------------------------------------------------------------|----------------------------------|---------------------------------------------------------------------------|-------------------------------------------------------------------------------------------|
| TEMIZED RECEIPTS | | or each category of the | (check only one) X 11a 11b 11c 12 |
| | | Detailed Summary Page | 13 14 15 16 17 |
| Any information copied from such Reports and or for commercial purposes, other than using the | Statements may e name and add | y not be sold or used by any perso dress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| NAME OF COMMITTEE (In Full) | | | |
| The American Occupational Therapy (AOTPAC) | Association, | Inc. Political Action Commit | tee |
| Full Name (Last, First, Middle Initial) A. Penelope A Moyers | | | Date of Receipt |
| Mailing Address 5440 10th Ct S | | | 09 / 12 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State | Zip Code | Transaction ID: 16790819 |
| <u>Birmingham</u> | AL | 35222-4016 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 50.00 |
| Name of Employer Univ of Alabama at Birmin- gham | Occupation OT | n | |
| Receipt For: | Aggregate | e Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | | 250.00 | |
| Full Name (Last, First, Middle Initial) 3. Jennifer Jo Amundson | | | Date of Receipt |
| Mailing Address 600 28th Ave SW | | | 09 12 7 2006 |
| City | State | Zip Code | Transaction ID: 16806786 |
| Willmar | MN | 56201-5078 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 30.00 |
| Name of Employer ESD 105 | Occupation OT | n | |
| Receipt For: | Aggregate | e Year-to-Date ▼ | |
| Primary General | | 273.00 | 1 |
| Other (specify) | | | |
| Full Name (Last, First, Middle Initial) Monica Lee Robinson | | | Date of Receipt |
| Mailing Address 368 W 6th Ave | | | 0 9 1 2 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State | Zip Code | Transaction ID: 16806787 |
| Columbus | OH | 43201-3135 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 50.00 |
| Name of Employer HCR Manor Care | Occupation OT | n | |
| Receipt For: | Aggregate | e Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | | 900.00 | |
| SUBTOTAL of Receipts This Page (optional) . | | | 130.00 |
| | | | |
| TOTAL This Period (last page this line numbe | r only) | | |

| | | | _ | | | | | | |
|-------------------------------------------------------------------------------------------------|--------------------------------|---------------------------------------------------------------------------|--------------------------------------------------------------|--|--|--|--|--|--|
| SCHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 8 / 23 | | | | | | |
| TEMIZED RECEIPTS | | or each category of the | (check only one) X 11a 11b 11c 12 | | | | | | |
| | | Detailed Summary Page | X 11a 11b 11c 12 15 16 17 | | | | | | |
| Any information copied from such Reports and S or for commercial purposes, other than using the | Statements ma e name and ad | y not be sold or used by any perso dress of any political committee to | on for the purpose of soliciting contributions | | | | | | |
| NAME OF COMMITTEE (In Full) | | | | | | | | | |
| The American Occupational Therapy (AOTPAC) | Association, | Inc. Political Action Commit | tee | | | | | | |
| Full Name (Last, First, Middle Initial) Linda Coogle Stephens | | | Date of Receipt | | | | | | |
| Mailing Address 1696 Wawona Ter Ne | | | 09 12 2006 | | | | | | |
| City | State | Zip Code | Transaction ID: 16806788 | | | | | | |
| Atlanta | GA | 30319-3718 | Amount of Each Receipt this Period | | | | | | |
| FEC ID number of contributing federal political committee. | C | | 30.00 | | | | | | |
| Name of Employer Atlanta Children's Therapy | Occupation OT | n | | | | | | | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 273.00 | | | | | | | |
| Full Name (Last, First, Middle Initial) 3. Mary Margaret Arnold | | | Date of Receipt | | | | | | |
| Mailing Address 1119 Maysville Ave | | | 09 12 7 2006 | | | | | | |
| City | State | Zip Code | Transaction ID: 16806790 | | | | | | |
| Zanesville | OH | 43701-5557 | Amount of Each Receipt this Period | | | | | | |
| FEC ID number of contributing federal political committee. | C | | 30.00 | | | | | | |
| Name of Employer Zane State College | Occupation OT | on | | | | | | | |
| Receipt For: | Aggregate | e Year-to-Date ▼ | | | | | | | |
| Primary General Other (specify) ▼ | | 242.00 | | | | | | | |
| Full Name (Last, First, Middle Initial) Carolyn Baum | | | Date of Receipt | | | | | | |
| Mailing Address 6314 S Rosebury 3 W | | | 09 / 12 / Y Y Y Y Y Y | | | | | | |
| City <u>Clayton</u> | State MO | Zip Code 63105-2255 | Transaction ID: 16806793 Amount of Each Receipt this Period | | | | | | |
| FEC ID number of contributing federal political committee. | C | 03103-2233 | 30.00 | | | | | | |
| Name of Employer Washington Univ School of Medicine | Occupatio OT | n | | | | | | | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 273.00 | | | | | | | |
| SUBTOTAL of Receipts This Page (optional) | | | 90.00 | | | | | | |

TOTAL This Period (last page this line number only)

600.00

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|-----------|----------------------------------------------------|-----------------------------------|---------------|-------------------------------------------|
| 5(| CHEDULE B (FEC Form 3X) | Use seperate schedule(s) | | NUMBER: PAGE 9/23 |
| ÍΤ | EMIZED DISBURSEMENTS | for each category of the | (check onl | y one) |
| • • | | Detailed Summary Page | X 21b | 22 23 24 25 26 |
| | | | 27 | 28a 28b 28c 29 30b |
| | y Information copied from such Reports and Statem | | , , | , , |
| or 1 | for commercial purposes, other than using the name | e and address of any political co | mmittee to so | licit contributions from such committee |
| \ | NAME OF COMMITTEE (In Full) | | | |
| \rangle | The American Occupational Therapy Asso (AOTPAC) | ciation, Inc. Political Action | Committee | 9 |
| | Full Name (Last, First, Middle Initial) | | | Transaction ID: 16919687 |
| ٩. | SunTrust Bank | | | Date of Disbursement |
| | | | | 09 13 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | Mailing Address PO Box 622227 | | | 09 13 2006 |
| | City | State Zip Code | | Amount of Each Disbursement this Period |
| | Orlando | FL 32862-2227 | | |
| | Purpose of Disbursement | - | | 643.97 |
| | bank fees | | 001 | |
| | Candidate Name | | Category/ | |
| | | | Type | |
| | Office Sought: House Disburse | ement For: | | bank fees |
| | Senate | Primary General | | Dank rees |
| | President | Other (specify) | | |
| | State: District: | | | |

| SUBTOTAL of Disbursements This Page (optional) | • | 643.97 |
|-----------------------------------------------------|---|--------|
| TOTAL This Period (last page this line number only) | • | 643.97 |

| <u>ا</u> ر | CHEDULE B (FEC FOIIII 3X) | Use seperate schedule(s) | \ I | | NUMBER | : | PAGE | 10 / 23 | 3 |
|------------|-----------------------------------------------------------------------------------------------------|---------------------------------------------------|-----|--------------------------|--------------------|---------------------------------|--------|----------|-----------|
| IT | EMIZED DISBURSEMENTS | for each category of the Detailed Summary Page | | (check only 21b 27 | - · - | X 23 24 28b 28 | | 25 29 | 26 30b |
| | y Information copied from such Reports and Statem or commercial purposes, other than using the name | | | | | | | | |
| \rangle | NAME OF COMMITTEE (In Full) The American Occupational Therapy AssociAOTPAC) | · · · · · · · · · · · · · · · · · · · | | | | | | | |
| ۸. | Full Name (Last, First, Middle Initial) Paula Hollinger For Congress Mailing Address P.O. Box 5861 | | | | | Disbursement | | 0 0 6 | Y |
| | | 7.0 | | | | | | | |
| | , | State Zip Code MD 21282 | | | Amount | of Each Disbur | | | - |
| | Purpose of Disbursement campaign contribution Candidate Name | | | 011 tegory/ | | | 10 | 0.00 | 0 |
| | · — | ment For: 2006 Primary General Other (specify) | ı | ype | campai | gn contributic | n | | |
| 3. | Full Name (Last, First, Middle Initial) Nancy Pelosi For Congress | | | | Date of | ction ID: 16769 Disbursement | | | _ |
| | Mailing Address 235 Montgomery Street Suite 610 | | | | 09 | 111 | y y | 0 ŏ 6 | Y] |
| | , | State Zip Code CA 94104 | | | Amount | of Each Disbur | sement | this Pe | eriod |
| | Purpose of Disbursement campaign contribution Candidate Name | | | 011 | <u> </u> | | . 10 | 0.00 | 0 |
| | Rep. Nancy Pelosi | | ı | tegory/ ype | | | | | |
| | Office Sought: X House Senate President State: CA District: 8 | ment For: 2006 Primary X General Other (specify) | - | | campai | gn contributic | on | | |
| Э. | Full Name (Last, First, Middle Initial) Pallone For Congress | | | | Date of | ction ID: 16769 Disbursement | 9089 | | |
| | Mailing Address PO Box 3176 | | | | 0 ^M 9 M | / D D / | y y | 0 Ď 6 | Y |
| | , | State Zip Code NJ 07740 | | | Amount | of Each Disbur | sement | this Pe | eriod |
| | Purpose of Disbursement campaign contribution | | | 011 | | | 10 | 0.000 | 0 |
| | Candidate Name Rep. Frank Pallone, Jr. | | Ca | tegory/ ype | | | | | |
| | Office Sought: X House Senate President State: NJ District: 6 | ment For: 2006 Primary X General Other (specify) | | | campai | gn contributio | on | | |
| S | UBTOTAL of Disbursements This Page (optional) . | | | • | | | 30 | 0.00 | 0 |
| T | OTAL This Period (last page this line number only) | | | • | | | | | |

| S | CHEDULE B (FEC Form 3X) | Use seperate schedule(s |) | | | IE NUMBE | R: | | | PAGE | Ξ 11/ | 23 |
|--------|-----------------------------------------------------------------------------------------------|---------------------------------------------------|------|------------|-------------|-----------------------|----------|-----------------------------------------|--------------|-------------|----------|----------------|
| IT | EMIZED DISBURSEMENTS | for each category of the Detailed Summary Page | | | 21b 27 | nly one) 22 28a | | 23 28b | 24 | 4 3c | 25 29 | 26 30b |
| | y Information copied from such Reports and S for commercial purposes, other than using the | | | | | | | | | | | ns |
| Ĭ. | NAME OF COMMITTEE (In Full) | Trains and address of any pointed | | | | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | | |
| \geq | The American Occupational Therapy A (AOTPAC) | Association, Inc. Political Ac | tion | Co | mmitt | ee | | | | | | |
| Α. | Full Name (Last, First, Middle Initial) | | | | | | | | 1676 | 9085 | | |
| | Langevin For Congress | | | | | M | of Dis | burse | | Υ | YY | Υ |
| | Mailing Address 181-A Knight St | | | | | 0 9 | | 1 | 1 / | | žoŏ | 6 |
| | City | State Zip Code | | | | Amou | unt of | Each | Disbu | rseme | ent this | Period |
| | Warwick Purpose of Disbursement | RI 02886 | | | | - [| | | | | 1000. | 00 |
| | campaign contribution | | | Ō. | 11 | | | | | | | |
| | Candidate Name Rep. James R. Langevin | | C | Cate Ty | gory/ pe | | | | | | | |
| | Office Sought: X House Dis | oursement For: 2006 | | | | camp | aian | cont | ributi | าท | | |
| | Senate President | Primary X General Other (specify) ▼ | | | | Carrie | aigii | COIII | iibuti | <i>)</i> 11 | | |
| | State: RI District: 2 | Other (specify) | | | | | | | | | | |
| | Full Name (Last, First, Middle Initial) | | | | | Trans | sactio | n ID: | 1676 | 9088 | | |
| В. | Friends Of Blanche Lincoln | | | | | | of Dis | burse | ement / | V | V V | V |
| | Mailing Address PO Box 3197 | | | | | 0 9 | М / | | 1 / | Ľ. | žoŏ | 6 ້ |
| | City Little Rock | State Zip Code AR 72203 | | | | Amou | ınt of | Each | Disbu | rseme | ent this | Period |
| | Purpose of Disbursement campaign contribution | | Г | 0. | 11 | 7 L. | | | | • • | 1000. | 00 |
| | Candidate Name Sen. Blanche Lambert Lincoln | | С | _ | gory/ | | | | | | | |
| | | oursement For: 2010 | | | • | camp | aian | cont | ributio | าท | | |
| | X Senate President | X Primary General Other (specify) ▼ | | | | James | , a.g. i | 00111 | | ,,, | | |
| | State: AR District: 1 | Other (specify) | | | | | | | | | | |
| C. | Full Name (Last, First, Middle Initial) Hastert For Congress Committee | | | | | | | n ID: | 1676 ment | 9074 | | |
| | Mailing Address P. O. Box 625 | | | | | 0 ^M 9 | M / | ^D 1 | D / | Y | ž 0 Ď | 6 ^Y |
| | PO Box 625 | | | | | | | | | | | |
| | City Batavia | State Zip Code IL 60510 | | | | Amou | ınt of | Each | Disbu | seme | ent this | Period |
| | Purpose of Disbursement | | | | | 7 L. | | | | | 4000 | 00 |
| | campaign contribution Candidate Name | | L | ;ate | gory/ | | | | | | | |
| | Rep. J. Dennis Hastert | | L | Ту | | | | | | | | |
| | Office Sought: X House Dis | oursement For: 2006 Primary X General | | | | camp | aign | cont | ributio | on | | |
| | President | Other (specify) | | | | | | | | | | |
| _ | State: IL District: 14 | <u> </u> | | | | | | | | | | |
| s | UBTOTAL of Disbursements This Page (option | nal) | | | <u> </u> | | | | | | 6000. | 00 |
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| | for commercial purposes, other than using the name | | | | | | | | |
| \rangle | NAME OF COMMITTEE (In Full) The American Occupational Therapy Association (AOTPAC) | ciation, Inc. Political Act | ion C | ommitte | e | | | | |
| ۹. | Full Name (Last, First, Middle Initial) Hooley For Congress | | | | Date | action ID: of Disburse | ment | | v v |
| | Mailing Address PO Box 2050 | | | | 0 9 | M / D 1 | 1 ' | ž 0 | 0 6 |
| | , | State Zip Code OR 97308 | | | Amou | nt of Each | Disburse | | |
| | Purpose of Disbursement campaign contribution | | | 011 | | | | 100 | 0.00 |
| | Candidate Name Rep. Darlene Hooley | | | egory/ ype | | | | | |
| | Office Sought: X House Senate President State: OR District: 5 | ment For: 2006 Primary X General Other (specify) | | | camp | aign contr | ribution | | |
| 3. | Full Name (Last, First, Middle Initial) Solis For Congress | | | | | action ID: | | 19 | |
| | | | | | | of Disburse | D / Y | ý n . | Ď 6 [°] |
| | Mailing Address 6380 Wilshire Blvd. #161 | | | | | | | | |
| | , | State Zip Code CA 90048 | | | Amou | nt of Each | Disburse | | |
| | Purpose of Disbursement campaign contribution | | |)11 | L. | | | 250 | 0.00 |
| | Candidate Name Rep. Hilda L. Solis | | | tegory/ ype | | | | | |
| | Office Sought: X House Disburse Senate President State: CA District: 32 | ment For: 2006 Primary X General Other (specify) | | | camp | aign contr | ribution | | |
| Э. | Full Name (Last, First, Middle Initial) Committee To Re-Elect Loretta Sanchez | | | | | action ID: of Disburse | | 16 | |
| | Mailing Address 1212 S Victory BI Suite 211 | | | | 0 9 | M / D 1 | D / Y | ž 0 | Ď 6 Ť |
| | City | State Zip Code CA 91502 | | | Amou | nt of Each | Disburse | ment th | is Period |
| | Purpose of Disbursement campaign contribution | | |)11 | <u> </u> | | | 150 | 0.00 |
| | Candidate Name Rep. Loretta Sanchez | | | egory/ ype | | | | | |
| | Office Sought: X House Senate President State: CA District: 47 | ment For: 2006 Primary X General Other (specify) | | | camp | aign contr | ribution | | |
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| The American Occupational Therapy Asso (AOTPAC) | ciation, Inc. Political Action | n Committee | | |
| Full Name (Last, First, Middle Initial) | | | Transaction ID: 16909596 | |
| Andrews For Congress Committee | | | Date of Disbursement | |
| Mailing Address 215 Fourth Avenue Suite 200 | | | 09 M / 18 / Y Y Y O O 6 Y | |
| City | State Zip Code | | Amount of Each Disbursement this Period | od |
| Haddon Heights Purpose of Disbursement | NJ 08035 | | 1000.00 | |
| campaign contribution | | 011 | | |
| Candidate Name Rep. Robert E. Andrews | | Category/ Type | | |
| Office Sought: X House Disburse Senate President State: NJ District: 1 | ement For: 2006 Primary X General Other (specify) | | campaign contribution | |
| Full Name (Last, First, Middle Initial) | | | Transaction ID: 16909597 | |
| 3. Friends Of Roy Blunt | | | Date of Disbursement | |
| Mailing Address PO Box 50100 | | | $\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 9 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 8 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 6 \end{smallmatrix} \end{bmatrix}$ | |
| City | State Zip Code | | Amount of Each Disbursement this Perio | od |
| Springfield | MO 65805 | | | • |
| Purpose of Disbursement campaign contribution | 1 | 011 | 1000.00 | |
| Candidate Name Rep. Roy Blunt | L | 011 Category/ Type | | |
| | ement For: 2006 | . 71 | compaign contribution | |
| Senate | Primary X General | | campaign contribution | |
| State: MO District: 7 | Other (specify) | | | |
| Full Name (Last, First, Middle Initial) | | | Transaction ID: 16909599 | |
| Friends Of Clay Shaw | | | Date of Disbursement | |
| Mailing Address P.O. Box 2188 | JOONS V | | $\begin{bmatrix} \begin{smallmatrix} M & 9 & M \\ 0 & 9 & M \end{bmatrix} \ / \ \begin{bmatrix} D & 1 & 8 \\ 1 & 8 \end{bmatrix} \ / \ \begin{bmatrix} Y & Y & Y & Q & 0 & 6 \\ Y & 2 & 0 & 0 & 6 \end{bmatrix}$ | |
| 2600 Ne 14th. Street Car | State Zip Code | | Amount of Each Disbursement this Perio | od |
| Fort Lauderdale | FL 33303 | | | |
| Purpose of Disbursement campaign contribution | 1 | 011 | 1000.00 | |
| Candidate Name | L | Category/ | | |
| Rep. E. Clay Shaw, Jr. | | Туре | | |
| Office Sought: X House Senate President State: FL District: 22 | ement For: 2006 Primary X General Other (specify) | | campaign contribution | |
| orare. L District. 22 | | | | _ |
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| The American Occupational Therapy Asso (AOTPAC) | ciation, Inc. Political Action | n Committee |) | | | | | |
| Full Name (Last, First, Middle Initial) | | | Transact | ion ID: 1690 | 09598 | | | |
| Jim Ramstad Volunteer Committee | | | |)isbursement | | · · · · | v . | |
| Mailing Address 1809 Plymouth Road So | uth #310 | | 09 | 18 | 2 | 0 0 6 | | |
| City Minnetonka | State Zip Code MN 55305 | | Amount o | of Each Disb | ursemen | t this Pe | eriod | |
| Purpose of Disbursement | | | | | 1 | 000.00 | 0 | |
| campaign contribution | | 011 | | | | - | | |
| Candidate Name Rep. Jim M. Ramstad | | Category/ Type | | | | | | |
| Office Sought: X House Disburse Senate President State: MN District: 3 | ement For: 2006 Primary X General Other (specify) | | campaig | n contribut | ion | | | |
| Full Name (Last, First, Middle Initial) | | | Transact | ion ID: 169 | 17700 | | | |
| 3. Schultz Debbie Wasserman | | | | Disbursement | | | | |
| Mailing Address 1071 Twin Branch Ln | | | 0 9 M | [/] 20 | y y | 0 0 6 | Y | |
| City | State Zip Code | | Amount o | of Each Disb | ursemen | t this Pe | eriod | |
| Weston | FL 33326 | | - | | | | - | |
| Purpose of Disbursement Void - Debbie Wasserman Schultz for Cong | Г | 011 | L | | | 250.00 | J | |
| Candidate Name Rep. Debbie Wasserman-Schultz | | Category/ Type | | | | | | |
| 9 1 | ment For: 2006 Primary General Other (specify) | | Void - Do Schultz t | ebbie Wass for Congres | serman ss | | | |
| Full Name (Last, First, Middle Initial) | | | Transact | ion ID: 170 | 31158 | | | |
| Johnson For Congress Committee | | | | isbursement | | | | |
| Mailing Address P. O. Box 1986 | | | 0 9 M | 28 | y y 2 | 0 0 6 | Y | |
| City New Britain | State Zip Code CT 06050 | | Amount o | of Each Disb | ursemen | t this Pe | eriod | |
| Purpose of Disbursement | | • • | | | 1 | 000.00 | 0 | |
| campaign contribution Candidate Name | | 011 Category/ | | | | | | |
| Rep. Nancy L. Johnson | | Type | | | | | | |
| Office Sought: X House Disburse Senate President State: CT District: 5 | ment For: 2006 Primary X General Other (specify) | | campaig | n contribut | ion | | | |
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| \rangle | The American Occupational Therapy Asse (AOTPAC) | ociation, Inc. Political Ad | ction (| С | omn | nittee | | | | | | | | |
| _ | Full Name (Last, First, Middle Initial) | | | | | | Trans | acti | on ID | : 170 | 0611 | 72 | | |
| Α. | Snowe For Senate | | | | | | M | of D м | isburs | | nt | V | · v | V |
| | Mailing Address P.O. Box 2006 | | | | | | 0,8 | IVI | 2 | 28 | Ĺ | 2 | οŏ | 3 |
| | City Portland | State Zip Code ME 04104 | | | | | Amou | ınt o | f Each | n Dis | burse | ment | t this I | Period |
| | Purpose of Disbursement | - TVIC 04104 | | | | _ | | | | | | 1 | 000. | 00 |
| | campaign contribution | | | 0 | 11. | | | | | | | | | |
| | Candidate Name Sen. Olympia J. Snowe | | | | egory ype | 7 | | | | | | | | |
| | X Senate President | sement For: 2006 Primary X General Other (specify) ▼ | l | | | | camp | aigı | n con | tribu | ution | | | |
| | State: ME District: 1 Full Name (Last, First, Middle Initial) | | | | | | | | | | | | | |
| В. | Friends Of Cliff Stearns | | | | | | Date | of D | isburs | eme | 06117 nt | | | _ |
| | Mailing Address PO Box 308 | | | | | | 0 ^M 9 | М | / D 2 | 28 | / Y | ž | οŏ | S ^Y |
| | City Silver Springs | State Zip Code FL 34489 | | | | | Amou | ınt o | f Each | n Dis | burse | - | | |
| | Purpose of Disbursement campaign contribution | | | ^ | 11 | | | 0 | | | | 1 | 000. | 00 |
| | Candidate Name Rep. Cliff B. Stearns | | Ca | at | egory ype | 7 | | | | | | | | |
| | Office Sought: X House Senate President State: FL District: 6 | sement For: 2006 Primary X General Other (specify) ▼ | 1 | | | | camp | aigı | n con | tribu | ution | | | |
| <u> </u> | Full Name (Last, First, Middle Initial) A Lot Of People Who Support Jeff Bingar | man | | | | | | | on ID | | 06109 | 91 | | |
| | Mailing Address PO Box 16210 | | | | | | | М | | 2 8 | / Y | ž | οŏ | S Y |
| | City | State Zip Code | | | | | Amou | ınt o | f Each | n Dis | burse | ment | t this | Period |
| | Albuquerque | NM 87191 | | | | | | - | | | | 1 | 000. | 00 |
| | Purpose of Disbursement campaign contribution | | | 0 | 11 | | | | • | | | • | 000. | 00 |
| | Candidate Name Sen. Jeff Bingaman | | Ca | at | egory ype | 7 | | | | | | | | |
| | X Senate President | sement For: 2006 Primary X General Other (specify) ▼ | - | | <u>, , , , , , , , , , , , , , , , , , , </u> | | camp | aigı | n con | ıtribu | ution | | | |
| | State: NM District: 2 | | | | | | | | | | | | | |
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| 01 1 | NAME OF COMMITTEE (In Full) | le and address of any pointica | ii COIII | 11111 | ilee io | SOIIC | il Cont | iibut | 10115 1 | TOITE | Sucri | JOHN | IIIIIIEE | |
| \rangle | The American Occupational Therapy Ass (AOTPAC) | ociation, Inc. Political Ac | tion (| Co | mmit | tee | | | | | | | | |
| ′ А. | Full Name (Last, First, Middle Initial) Nathan Deal For Congress | | | | | | Trans Date | | - | | | 30 | | |
| | Mailing Address PO Box 902 | | | | | | 0 ^M 9 | М | | 2 8 | / [` | Ž | 0 0 6 | 3 Y |
| | City | State Zip Code | | | | | Amou | ınt o | f Eac | h Dis | burse | men | t this I | Period |
| | Gainesville | GA 30503 | | | | | | | | - | | - | - | |
| | Purpose of Disbursement campaign contribution | | | 01 | 11 | | | - | | • | | 1 | 000. | 00 |
| | Candidate Name Rep. Nathan Deal | | | ate Ty | gory/ pe | | | | | | | | | |
| | Office Sought: X House Disburs Senate President State: GA District: 10 | ement For: 2006 Primary X General Other (specify) | • | | | | camp | aig | n cor | ntribi | ution | | | |
| _ | Full Name (Last, First, Middle Initial) | | | | | + | Tron | | an 15 | . 17 | 0611 | 21 | | |
| В. | Doggett For Us Congress | | | | | | Trans Date | | isburs | seme | | | V | V |
| | Mailing Address PO Box 5843 | | | | | | 0,8 | IVI | | 28 | | 2 | 0 Ď 6 | 6 |
| | City Austin | State Zip Code TX 78763 | | | | | Amou | ınt o | f Eac | h Dis | burse | | | Period |
| | Purpose of Disbursement campaign contribution | | Г | 01 | 1 | | | | - | 0 | | . 2 | 2000. | 00 |
| | Candidate Name Rep. Lloyd Doggett | | Ca | - | gory/ | | | | | | | | | |
| | Office Sought: X House Disburs Senate President State: TX District: 25 | ement For: 2006 Primary X General Other (specify) | | | | | camp | aig | n cor | ntribi | ution | | | |
| _ | Full Name (Last, First, Middle Initial) | | | | | | Trans | sacti | on IE |): 17 | 0610 | 95 | | |
| C. | Castle Campaign Fund | | | | | | Date | _ | | | nt | | * 1/ * | |
| | Mailing Address P.O Box 133 | | | | | | 0 9 | М | / D | 28 | | ž | 0 0 6 | 3 [*] |
| | City Wilmington | State Zip Code DE 19899 | | | | | Amou | ınt o | f Eac | h Dis | burse | men | t this I | Period |
| | Purpose of Disbursement campaign contribution | | Г | 01 | 11 | | L. | _ | | | | 1 | 000. | 00 |
| | Candidate Name Rep. Michael N. Castle | | Ca | _ | gory/ | ' | | | | | | | | |
| | χ Senate President | ement For: 2006 Primary X General Other (specify) | I. | | | | camp | aig | n cor | ntribi | ution | | | |
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| The American Occupational Therapy Assi (AOTPAC) | ociation, Inc. Political Action | n Committee | | |
| Full Name (Last, First, Middle Initial) | | | Transaction ID: 17061 | 1159 |
| John Lewis For Congress | | | Date of Disbursement | V |
| Mailing Address 2015 Wallace Rd. | | | 09 / 28 | [*] 2006 |
| City | State Zip Code | | Amount of Each Disburs | sement this Period |
| Atlanta Purpose of Disbursement | GA 30331 | | | 2000.00 |
| campaign contribution | | 011 | | |
| Candidate Name Rep. John Lewis | | Category/ Type | | |
| Office Sought: X House Disburs Senate President State: GA District: 5 | ement For: 2006 Primary X General Other (specify) | | campaign contributio | n |
| Full Name (Last, First, Middle Initial) | | | T .: ID 47004 | 1400 |
| Mccrery For Congress Committee | | | Transaction ID: 17061 Date of Disbursement | |
| Mailing Address Post Office Box 52956 333 Texas Street Suite | 900 | | 09 / 28 / | [°] 2006 |
| City Shreveport | State Zip Code LA 71135 | | Amount of Each Disburs | sement this Period |
| Purpose of Disbursement | Г | 0.1.1 | | 2000.00 |
| campaign contribution Candidate Name | | 011 Category/ | | |
| Rep. Jim McCrery Office Sought: X House Disburs | ement For: 2006 | Туре | | |
| Senate President | Primary X General Other (specify) | | campaign contributio | on |
| State: LA District: 4 | | | | |
| Full Name (Last, First, Middle Initial) People For English | | | Transaction ID: 17061 Date of Disbursement | 1136 |
| Mailing Address PO Box 1940 | | | 09 / 28 / | [°] 2006 |
| City Erie | State Zip Code PA 16507 | | Amount of Each Disburs | sement this Period |
| Purpose of Disbursement campaign contribution | | 011 | | 1000.00 |
| Candidate Name Rep. Phil English | | Category/ Type | | |
| | ement For: 2006 Primary X General Other (specify) | . 1750 | campaign contributio | n |
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| V I | NAME OF COMMITTEE (In Full) | — and address of any pointica | ai COIII | 1111 | iillee il | SOIIC | it Conti | ibuti | 0115 11 | OIII SI | JCH CO | mmuee | |
| \rangle | The American Occupational Therapy Ass (AOTPAC) | ociation, Inc. Political Ac | tion (| C | ommi | ttee | | | | | | | |
| Α. | Full Name (Last, First, Middle Initial) | | | | | | | | | - | 6113 | 9 | |
| Λ. | Ensign For Senate | | | | | | | of Di м | sburs | | t / Y | YY | Y |
| | Mailing Address PO Box 26568 | | | | | | 0 9 | | 2 | 2 8 2 8 | L | žoŏ | 6 |
| | City Las Vegas | State Zip Code NV 89126 | | | | | Amou | ınt o | f Each | Disb | ursem | ent this | Period |
| | Purpose of Disbursement | 00120 | | | | 1 | | | | | | 1000 | .00 |
| | campaign contribution | | _ | | 11. | | | | | | | | |
| | Candidate Name Sen. John E. Ensign | | | | egory/ ype | | | | | | | | |
| | χ Senate President | sement For: 2006 Primary X General Other (specify) | • | | | | camp | aigr | n con | tribu | tion | | |
| | State: NV District: 2 | | | | | | | | | | | | |
| В. | Full Name (Last, First, Middle Initial) Ensign For Senate | | | | | | Date | of Di | sburs | emen | 61140 t | 0 | |
| | Mailing Address PO Box 26568 | | | | | | 0 ^M 9 | М | ^D 2 | 2 8 2 | / Y | žoŏ | 6 ^Y |
| | City Las Vegas | State Zip Code NV 89126 | | | | | Amou | int o | f Each | Disb | ursem | | Period |
| | Purpose of Disbursement campaign contribution | | | ^ | 4.4 | 1 | L. | _ | _ | | _ | 2500 | 0.00 |
| | Candidate Name | | _ | - | 11 egory/ | 4 | | | | | | | |
| | Sen. John E. Ensign | | 1 | | ype Î | | | | | | | | |
| | Office Sought: House Disbury X Senate President | sement For: 2006 Primary X General Other (specify) | | | | | camp | aigr | n con | tribu | tion | | |
| | State: NV District: 2 | _ canon (openiny) • | | | | | | | | | | | |
| C. | Full Name (Last, First, Middle Initial) Friends Of Congressman Tim Holden | | | | | | | | on ID | | 61149 t | 9 | |
| | Mailing Address 18 N. Second Street PC PO Box 37 |) Box 37 | | | | | 0 ^M 9 | М | D 2 | 2 8 8 | / Y | ž 0 0 | 6 Y |
| | City Saint Clair | State Zip Code PA 17970 | | | | | Amou | int o | f Each | Disb | ursem | ent this | Period |
| | Purpose of Disbursement campaign contribution | | | 0 | 11 | 1 | | | | | | 1000 | 0.00 |
| | Candidate Name Rep. Tim Holden | | Ca | ate | egory/ /pe | 1 | | | | | | | |
| | Office Sought: X House Senate President Disburs | sement For: 2006 Primary X General Other (specify) | 1 | | · • | | camp | aigr | n con | tribu | tion | | |
| _ | State: PA District: 17 | | | | | | | | | | | | |
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| The American Occupational Therapy A (AOTPAC) | ssociation, Inc. Political Acti | ion C | ommitt | ee | | | | | |
| Full Name (Last, First, Middle Initial) | | | | Trans | saction | ID: 170 | 061150 |) | |
| Hooley For Congress | | | | M | of Disbu | | nt | V . V | V |
| Mailing Address PO Box 2050 | | | | 0 9 | , , , , , , , , , , , , , , , , , , , | 28 | | žoŏ | 6 |
| City Salem | State Zip Code OR 97308 | | | Amo | unt of Ea | ch Disl | bursem | ent this | Period |
| Purpose of Disbursement | 011 07000 | | | - [] | | | | 1000. | .00 |
| campaign contribution | | C |)11 | | | | | | |
| Candidate Name Rep. Darlene Hooley | | | egory/ ype | | | | | | |
| Office Sought: X House Senate President State: OR Dist | ursement For: 2006 Primary X General Other (specify) ▼ | | | camp | oaign co | ontribu | ution | | |
| Full Name (Last, First, Middle Initial) | | | | T | | ID 470 | 20117 | | |
| Pete Stark Re-Election Committee | | | | Date | saction of Disbu | ırsemer | | | V |
| Mailing Address P.O. Box 8331 | | | | 0 ^M 9 | M / | ^D 2 8 | | žoŏ | 6 |
| City Fremont | State Zip Code CA 94537 | | | Amoi | unt of Ea | ch Disl | bursem | | • |
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| Full Name (Last, First, Middle Initial) | | | Transaction ID: | 17061155 | | | | |
| Friends Of Bobby Jindal Inc | | | Date of Disburse | | | | | |
| Mailing Address PO Box 8628 | | | 09 / 2 | 8 7 2006 | | | | |
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| Full Name (Last, First, Middle Initial) | | | T | 17001100 | | | | |
| Pryce For Congress | | | Transaction ID: Date of Disburse | ment | | | | |
| Mailing Address 145 E. Rich Street | | | 09 / 2 | 8 7 2006 | | | | |
| City Columbus | State Zip Code OH 43215 | | Amount of Each | Disbursement this Period | | | | |
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| Rep. Deborah Pryce | | Туре | | | | | | |
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| Allyson Schwartz For Congress | | | Date of Disburse | | | | | |
| Mailing Address P.O. Box 45706 | | | 09 / 2 | 8 7 2006 | | | | |
| City Philadelphia | State Zip Code PA 19149 | | Amount of Each | Disbursement this Period | | | | |
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| Candidate Name Rep. Allyson Y. Schwartz | | Category/ Type | | | | | | |
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| Schultz Debbie Wasserman | | | | sbursement | · V · V · | V |
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| Ben Cardin For Senate | | | | sbursement | | _ |
| Mailing Address P.O. Box 21093 | | | 09 | ^D 28 / Y | ž 0 ŏ 6 | Y |
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| Rep. Jay Inslee | | Туре | | | | |
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| ۹. | Brad Miller For United States Congres | s | | | Date of Disbursement |
| | Mailing Address P.O. Box 10322 | | | | 09 |
| | City Raleigh | State NC | Zip Code 27605 | | Amount of Each Disbursement this Period |
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